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CONFIRMATION NO. 8247

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|--|---|-------------------------------|---|---|--------------------------------|
| SERIAL NUMBER 10/825,534 | FILING OR 371(c) DATE 04/15/2004 RULE | CLASS 600 | GROUP ART UNIT 3766 | ATTORNEY DOCKET NO. IT140825 (5024-00118) | |
| APPLICANTS G. Ian Rowlandson, Milwaukee, WI; ** CONTINUING DATA ***** <i>MR</i> ** FOREIGN APPLICATIONS ***** <i>MR</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/24/2004 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <input type="checkbox"/> Allowance Verified and <i>Rowlandson</i> <i>MR</i> Acknowledged Examiner's Signature Initials | | STATE OR COUNTRY WI | SHEETS DRAWING 5 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 7 |
| ADDRESS 26753 | | | | | |
| TITLE System and method for sudden cardiac death prediction | | | | | |
| FILING FEE RECEIVED 1244 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |